PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

KPG-5089US.

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			19					RATE	FEE]	RATE	FEE
FC)R		NUMBER FILED .		NUMB	NUMBER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			<i>i</i> 9 minus 20=		* 0			X\$ 9=		OR	X\$18=	0
INDEPENDENT CLAIMS			/ minus 3 =		* 0			X43=		OR	X86=	0
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		1 1	+290=	
* If	the difference	e in column 1 is	ero, enter	"0" in c	column 2		TOTAL		OR OR	TOTAL	770	
	С	LAIMS AS A	MENDED	IENDED - PART II			•	TOTAL	l	UN	OTHER	
	_	(Column 1)	(Colum		nn 2)	(Column 3)	n 3) SMAL		ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	- CL A124	=		X43=	٠	OR	X86=	
<u> </u>	FIRST PRESE	ENTATION OF MU	JETIPLE DEF	PINDENT	CLAIM		1	+145=		OR	+290=	
								TOTAL ADDIT. FEE		OB	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								AUDII. FEE			ADDII. PEE	
AMENDMENT B	- % -	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	CI AINA	=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
·								TOTAL		_ L	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3								.DDIT. FEE L		•	ADDII. FEEL	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIO PAID F	EST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	П	X\$ 9=		OR	X\$18=	
	Independent	L	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT						-	+145= .			+290=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "High st Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								-	OR [OR ,	TOTAL	
***	f the "Highest Nur	mber Previously Pai mber Previously Paid ber Previously Paid	id For IN THIS	S SPACE is	less than	n 3, enter "3."	~1	DDIT. FEE L nd in the appr	ropriate box	. ,	NDDIT. FEE L Jmn 1.	